2002

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Attorney Docket No.: 6)84,204 US

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: Hjort et al.

Application No.: 09/826,245

Group Art Unit: 1615

RECEIVED **CENTRAL FAX CENTER**

Examiner: H. Shiek

OCT 2 4 2003

Confirmation No: 2682

Filed: April 4, 2001

For: New Pharmaceutical Composition And The Process for its Preparation

OFFICIAL

DECLARATION UNDER 37 C.F.R. 1-132 OF DR. ASTRID SPILLUM

Mail Stop After Final Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313

Sir:

- I, Astrid Spillum, declare as follows:
- 1. Since November 1991, I have been a Manager within Product Development at Nove Nordisk® A/S. My professional experience formulation and manufacturing of solid dosage forms. A copy of my Curriculum Vitae is attached herewith as Exhibit A. However, I am not a named inventor of the above-identified patent application.
- 2. I understand that the claims of this application have been rejected as obvious over WO 99/19313 by Lohray.
- 3. The following experiment was performed under my direction and control. Three different types of formulations of the arginine salt of (-)3-[4-[2-(phenoxazin-10yl)ethoxy]phenyl]-2-ethoxypropanoic acid (hereafter compound A) were prepared to investigate the influence of different formulation principles on the stability of compound A. Wet granulation, melt granulation and direct compression were tested as formulation principles. The strengths of compound A were 0.5 mg and 10 mg in 200 mg tablets. The

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tablets were stored in open containers at 40°C/75% RH.

The compositions of the tablets are shown below:

Direct compression:

Compound A	0.354% or 7.08%		
Microcrystalline cellulose	20%		
Anhydrous lactose	74.6% or 67.9%		
Talc	4.5%		
Magnesium stearate	0.5%		

Process: API and fillers are mixed, tale and magnesium stearate are added separately.

Melt granulation:

Compound A	0.354% or 7.08%		
Anhydrous lactose	87.6% or 80.9%		
Мастодо! 6000	7%		
Talc	5%		

Process: All ingredients are mixed and heated up to ~ 65°C in a high shear mixer whereby macrogol 6000 melts and granules are formed. Tale is added after cooling.

Wet granulation:

Compound A	0.354% or 7.08%
Microcrystalline collulose	19%
Lactose monohydrate	79.1% or 72.4%
Talc	1%
Magnesium stearate	0.5%

Process: API and fillers are mixed and granulated with water. Talc and magnesium stearate are added after drying.

The stability of the above formulations were assessed by measuring the amount of impurities by capiallary electrophorisis of 0, 1, 3 and 12 months. The data after 6 months were obtained by HPLC analysis.

4. The results from the experimenta described in ¶ 3 are given in the table below.

ontainers.	, 		Storag	e time, n	onths	
Formulation	Tablet Strength	0	1	3	61	12
		1	1.1%	1.0%	0.6%	1.6%
	0.5 mg	0.7%		0.6%	0.9%	1.2%
Direct Compression	10 mg	0.3%	0.4%	l	3,8%	9.3%
	0.5 mg	0.8%	5.6%	5.3%		3.8%
Melt Granulation	10 mg	0.3%	0.6%	1.5%	1.1%	1
		0.6%	4.4%	6.9%	1.8%	5.7%
Wet Granulation	0.5 mg	0.4%	1.6%	2.3%	0.6%	1.9%
	10 mg	0.476	1.074			

1: HPLC Impurities (CB not systlable)

Analysed as above, a low number indicates a better stability of compound A than a high number.

- 5. The data above therefore clearly show that formulation by direct compression using microcrystalline cellulose, anhydrous lactose, tale and magnesium stearate as excipients is by far superior to either melt granulation using anyhydrous lactose, macrogol and tale as excipients or wet granulation using microcrystalline cellulose, lactose monohydrate, tale and magnesium steamte as excipients. This result was totally unexpected and could not be anticipated by prior to these experiments.
 - 6. I further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements are made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent lesuing thereon.

Astrid Spillum

30-sep-2003

CURRICULUM VITAE

Name:

Astric Spillum

Date of birth:

18 July 1952

Education:

M.Sc. (Pherm.)

Year:

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School/University:

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PUBLICATIONS

Acta Pharm. Nord. 3 (3) 131-136 (1991)

"Meeting Stability Test Requiremnets when Applying for Global Marketing Authorisation"

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Stability Testing, London 1999 "Matrixing: Reducing Stability Testing Costs through Implementing Matrixing"

Date: 15-542-2003

Departments: Product Development, SDF Pliot Plant, Clinical Supplies Operations, Clinical Supplies

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'egri	Employed St.	Employed se:	
971 - 1973	L. Bagger Hanson, Phermacist	Traines) street le
977	Royal Danish School of Pharmacy	Junior Lecturer	Laboratory lectures in physical chamistry
1977 - 19 84	A/S Dumex Phermacoutical Development	Section Leader Laboratory	Development of pharma- ceutical dosage form
1984 - 1991.	A/S Dumex Pharmacautical Development	Mana gar	All ectivities within pharmaceutical develop- ment laboratory
1991 - 1994	Novo Nordisk A/S Pharmaceutical Devalopment	Menager	All activities within phar- maceutical development Pharmaceuticals Division of solid desage form
1994	Novo Nordisk A/S. Product Development Phermacouticals Division	Manager	All activities within, pharmaceutical develop- ment of new products
1995	Novo Nordisk A/S Product Development Pharmaceuticals Development	Mana g ar	All activities within pharmaceutical develop-
2000	Novo Nordisk A/S Product Development SDF Pilot Plant Pharmacauticals Development	Manager .	All activities within pharmaceutical development of new products and manufacturing of solid dosage forms for clinical trials.
2003	Novo Nordisk A/S Product Development & Clinical Supplies Operations CMC Development	· Mainteger	All activities within pharmaceutical development of new products and manufacturing of editid desage forms for clinical trials. Distribution and packing of clinical supplies. Local Supplies Coordination at Clinical Supplies.

Deta: 15-50-2003

redopment, 80F Pilot Plant, Clinical Supplies Operations, Clinical Supplies